FORM 6 (ND/SD MISS. DEC. 2016)

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF MISSISSIPPI

V.			CIVIL ACTION NO.	1:24-cv-25-LG-RPM	
Justin V	Wetzel, et al.	Defendant			
	APPLI	CATION FOR ADMISSION	N PRO HAC VIC	Е	
(A)	Name:	Christopher J. R. Merken			
	Firm Name:	Dechert LLP			
	Office Address:	2929 Arch Street, Cira Cer	ntre		
	City:	Philadelphia	PA State	19104 Zip	
	Telephone:	215-994-4000	Fax:		
	E-Mail:	christopher.merken@deche	ert.com		
(B)	Client(s):	Disability Rights Mississip	pi		
	Address:	5 Old River Place, Suite 101			
	City:	Jackson	State MS	Zip 39202	
	Telephone:	601-968-0600	Fax:		

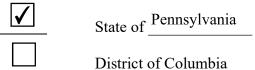
The following information is optional:

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Have you had a prior or continuing representation in other matters of one or more of the
clients you propose to represent, and is there a relationship between those other matter(s) and
the proceeding for which you seek admission?

Do you have any special experience, expertise, or other factor that you believe makes it particularly desirable that you be permitted to represent the client(s) you propose to represent in this case?

(C) I am admitted to practice in the:



and I am currently in good standing with that Court. A certificate to that effect, issued by the appropriate licensing authority within ninety days of the date of this Application, is enclosed; the physical address, telephone number and website/email address for that admitting Court are:

Pennsylvania Supreme Court 601 Commonwealth Ave #4500 Harrisburg, PA 17106 (717) 787-6181

https://www.pacourts.us/courts/supreme-court/prothonotarys-addresses

All other courts before which I have been admitted to practice:

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	Jurisdiction I	Period of A	Admissio	n
See attac	ee attachment See Attac		nent	
(D)	Have you been denied admission pro hac vice in this state?		Yes	No •
	Have you had admission pro hac vice revoked in this state?		\bigcirc	\odot
	Has Applicant been formally disciplined or sanctioned by an in this state in the last five years?	y court	\bigcirc	•
name and fi	answer was "yes," describe, as to each such proceeding, the notes of the person or authority bringing such proceedings; the date anally concluded; the style of the proceedings; and the findings ection with those proceedings:	s the procee	edings w	vere initiated
			Yes	No
(E)	Has any formal, written disciplinary proceeding ever been brought against you by a disciplinary authority in any other		103	110
	jurisdiction within the last five years?		0	\odot

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If the answer was "yes," describe, as to each such proceeding, the nature of the allegations; the name of the person or authority bringing such proceedings; the date the proceedings were initiated and finally concluded; the style of the proceedings; and the findings made and actions taken in connection with those proceedings.

			Yes	No
(F)	Have you been formally held sanctioned by any court in a for disobeying its rules or ord	written order in the last five	ve years	•
	If the answer was "yes," described the name of the court before contempt order or sanction, the court's rulings (a copy of the attached to the application).	which such proceedings whe caption of the proceeding	ere conducted; the date	e of the s of the
(G)	Please identify each procee pro hac vice in this state wi	_ ,		roceed
Nam	e and Address of Court	Date of Application	Outcome of Appl	ication

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(H)	Please identify each case in which you have appeared as counsel pro hac vice in this state within the immediately preceding twelve months, are presently appearing as counsel pro hac vice, or have pending applications for admission to appear pro hac vice, as follows:					
Name	e and Address of Co	ourt	Style of Case			
					Yes	No
(I)	•		amiliar with all the E UNITED STATES			
	COURTS FOR TH MISSISSIPPI?	E Northern	AND SOUTHERN I	DISTRICTS OF	\odot	0
	Have you read OF PROFESSION			MISSISSIPPI RULES	•	0
(J)	Please provide the associated for this	_	information abou	t the resident atto	orney who has	s been
Name	and Bar Number					
Firm 1	Name:					
Office	e Address:					
		City:		State:	Zip:	
		Telephone:		Fax:		
Email	address:					

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(K)	The undersigned resident attorney certifies that he/she agrees to the association with
	Applicant in this matter and to the appearance as attorney of record with Applicant.

Resident Attorney

I certify that the information provided in this Application is true and correct.

Unless exempted by Local Rule 83.1(d)(5), the application fee established by this Court must be enclosed with this Application.

CERTIFICATE OF SERVICE

The undersigned Resident Attorney certifies that a copy of this Application for Admission

Pro Hac Vice has been mailed or otherwise served on this date on all parties who have appeared in this case.

1st April 24
This the _____ day of _____, 20__.

Resident Attorney